

VITAL RECORDS SECTION

General Public

Request for copies of records of vital events which occurred in Connecticut

Attached are the request forms to be used by individuals requesting vital records of events which occurred in the State of Connecticut. Please feel free to make copies.

The State of Connecticut Vital Records Section only maintains records which have occurred in Connecticut since July 1, 1897. For records prior to that date, please contact the town/city of occurrence or the Connecticut State Library at (860) 566-3692.

Divorce decree records must be requested from the Superior Court where the divorce was granted. Please call the appropriate court for fees and requirements.

The vital records at the Department of Public Health (DPH) are being microfilmed which currently precludes this office from issuing certified copies of records. Requests for records must be sent to the town or city of occurrence.

The fee for a certificate at the town level is \$5.00. Please remit a **money order** made payable to the Branford Town Clerk.

Section 19a-41-2, of the Connecticut State Agencies' Regulations, requires that anyone requesting a copy of a birth certificate in the State of Connecticut, either in person or by mail, ***must submit a photocopy of a picture identification.***

Pursuant to Connecticut General Statutes §7-51 and 7-51a, Connecticut birth records, which are less than 100 years old, are "confidential" and are not open to the general public. Please see the attachment pertaining to those individuals who are entitled to request and receive birth records. Anyone requesting, either in person or by mail, a copy of a birth certificate that is less than 100 years old, shall provide documentation proving that such person is entitled to a copy of the birth certificate under Section 7-51 of the Connecticut General Statutes.

Additionally, requests made for a certified copy of a marriage license will be issued without the social security numbers of the bride and groom, unless the requester is the bride, groom, officiator of the marriage, town clerk, registrar, or other persons authorized by the Department of Public Health. Similarly, for deaths occurring after July 1, 1997, the death certificate will be issued without the social security number of the decedent, unless the request is made by a party specified on the death certificate, such as the informant, licensed funeral director, licensed embalmer, conservator, surviving spouse, physician, town clerk, or registrar, or other persons as authorized by the Department of Public Health.

For additional information, please contact a DPH Customer Service Representative at (860) 509-7897 or the appropriate local registrar.

VITAL RECORDS SECTION Access to Birth Records

Connecticut General Statutes § 7-51 and 7-51a, allows access to birth records to the following categories of individuals:

*** *Birth records more than 100 years old:***

Are open to any person

*** *Birth records less than 100 years old are open to:***

Person whose birth is recorded (If person is 18 or older)

Parents Grandparent or Guardian, if a minor

Grandchildren Spouse Children (If over 18)

Local Health Director Chief Elected official of Municipality or agent

Attorneys-at-law representing the registrant or the registrant's authorized agent

Title Examiners representing the registrant or the registrant's authorized agent

persons authorized by court order

State or Federal Agency employee authorized by DPH Commissioner

Members of incorporated genealogical societies authorized to conduct business in the State of Connecticut

REQUEST FOR COPY OF BIRTH CERTIFICATE

VS-39B Revised: 12/13/01

PLEASE PRINT**DO NOT MAIL CASH**FULL NAME AT BIRTH: _____
FIRST MIDDLE LAST NAMEDATE OF BIRTH: ____/____/____ PLACE OF BIRTH: _____
MONTH DAY YEAR TOWN/CITYFATHER'S FULL NAME: _____
FIRST MIDDLE LAST NAMEMOTHER'S MAIDEN NAME: _____
FIRST MIDDLE MAIDEN NAME**PERSON MAKING THIS REQUEST:**NAME: _____
FIRST MIDDLE LAST NAMEADDRESS: _____
NUMBER STREET

TOWN/CITY: _____ STATE: _____ ZIP CODE: _____

SIGNATURE: **X** _____

RELATION TO PERSON NAMED IN CERTIFICATE: _____

REASON FOR MAKING REQUEST: _____

CERTIFICATE SIZE: ☐ WALLET SIZE
NOTE THAT THE WALLET SIZE BIRTH CERTIFICATE CONTAINS LESS
INFORMATION THAN THE FULL SIZE CERTIFICATE. IT MAY NOT SATISFY ALL
PROOF OF IDENTIFICATION REQUIREMENTS SUCH AS THOSE NEEDED TO
OBTAIN PASSPORTS.☐ FULL SIZE

NUMBER OF COPIES

Requester must attach a copy of picture Identification and verification of relationship to registrant.

FEE: \$5.00 per copy. Money order made payable to Branford Town Clerk

Mail this request with payment to: Town Clerk

Town of Branford
1019 Main Street
Branford, CT 06405

Attach a copy of Picture Identification here: